FORM APPROVED OMB NO. 0938-0193

| TRANSMITTAL AND NOTICE OF APPRO<br>OF STATE PLAN MATERIAL   | OVAL 1. TRANSMITTAL NUMBER: 2. STATE: CT 99-005                              |
|---|--|
| FOR: HEALTH CARE FINANCING ADMINISTRATIO  | 3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)   |
| TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES             | 4. PROPOSED EFFECTIVE DATE 4-1-99 or As Effective by Law                     |
| 5. TYPE OF PLAN MATERIAL (Check one) NEW STATE PLANAMENDMENT TO BE CO   | ONSIDERED AS NEW PLAN <u>x</u> AMENDMENT                                     |
| COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN   | AMENDMENT (Separate Transmittal for each amendment)                          |
| 6. FEDERAL STATUTE/REGULATION CITATION:   | 7. FEDERAL BUDGET IMPACT:  |
| Section 1931 of the Act   | a. FFY \$  |
|   | b. FFY \$  |
| 8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHME Supplement 12 to Attachment 2.6-A pp. 1-6.                           | 9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): |
| 10. SUBJECT OF AMENDMENT:   |  |
| Medicaid for Low-Income Families  |  |
| 1. GOVERNOR'S REVIEW (Check One):  _ GOVERNOR'S OFFICE REPORTED NO COMMENT _ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED | <u>x</u> OTHER, AS SPECIFIED:  |
| NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMIT  |  |
| 12. SIGNATURE OF STATE AGENCY OFFICIAL:   | 16. RETURN TO: State of Connecticut  |
| The U Tacker  | Department of Social Services  |
| 13 TYPED NAME: Rita M. Pacheco  | 25 Sigourney Street  |
| 14. TITLE: Deputy Commissioner  | Hartford, CT 06106-5033  |
| 5/13/99   | Att. Cuulan Massicatta   |
| 15. DATE SUBMITTED:   | — Att: Cuyler Massicotte   |
| May , 1999  |  |
| FOR REGIONAL O  | OFFICE USE ONLY  |
| 17. DATE RECEIVED:  | 18. DATE APPROVED:   |
| May 20, 1999  | 10/18/2000   |
| PLAN APPROVED - OI  |  |
| 19. EFFECTIVE DATE OF APPROVED MATERIAL:  | 20/ SIGNATURE OF REGIONAL OFFICIAL   |
| as effective by law or April 1, 1999  | Marelle Henread for  |
| 21. TYPED NAME:   | 22. TITLE Associate Regional Administrator                                   |
| Ronald Preston 22. REMARKS:   | Division of Medicaid and State Operations                                    |
|   |  |
|   |  |
|   |  |
|   |  |
| FORM HCFA-179 (07-92)   |  |

| State: Connecticut   |
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| ELIGIBILITY UNDER 1931 OF THE ACT  |
| The State covers low-income families under section 1931 of the Act.  |
| The following groups were included in the AFDC State Plan effective July 16, 1996:   |
| X Pregnant women with no other eligible children.  |
| X AFDC children age 18 who are full time students in a secondary<br>school or in the equivalent level of vocational or technical training.   |
| In determining eligibility for Medicaid, the agency uses the AFDC standards and methodology in effect as of July 16, 1996 without modification.  |
| In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, with the following modifications:                         |
| The agency applies lower income standards than those in effect as of May 1, 1988, as follows:  |
| The agency applies higher income standards than those in effect as of July 16, 1996, increased by no more than the percentage increase in the CPI-U since July 16, 1996, as follows:   |
| The agency applies higher resource standards than those in effect as of July 16, 1996, increased by no more than the percentage increase in the CPI-U since July 16, 1996, as follows: |
|  |
| TN No.: 99-005 Approval Date 10/11/2000 Effective Date: 04-01-99 Supercedes TN No.:  |

| STATE PLAN UNDER TITLE XIX IF THE SOCIAL SECURITY ACT   |
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| State: Connecticut  |
| ELIGIBILITY UNDER 1931 OF THE ACT   |
|   |
| X The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:   |
| Income Methodologies  |
| Child Support: The first \$100 per month of current child support income received by the family is disregarded whether paid directly to the family or through the department. All other current child support income is counted in determining eligibility.   |
| Dependent Child Earnings: Earned income of a dependent child who is a student, either part-time or full-time, is disregarded in determining eligibility.  |
| Disregard of Awards: Financial awards received by a recipient for educational attendance, attaining certain grade levels, or attainment levels (e.g., increased reading level) is disregarded as income or as a resource in determining eligibility.  |
| Earned Income Disregard: For families who received Medicaid in one of<br>the four preceding months and for current recipients, earned income is<br>disregarded as long as the assistance unit's gross earnings do not exceed<br>the Federal Poverty Guideline for the family size. Assistance units with<br>gross earnings at least equal to the Federal Poverty Guideline are ineligible |
| Gross Income Test: Eligibility is determined without regard to the 185 percent gross income test.   |
| Income Disregard: Otherwise countable Income between the CNIL and the Standard of Need used to determine TANF eligibility is disregarded.   |
|   |
| TN No.: 99-005 Approval Date $\frac{i \vartheta / i \vartheta}{2 - 6 \vartheta}$ Effective Date: 04-01-99   |
| Supercedes TN No.:  |

| State: | Connecticut |                                   |
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|        |             |                                   |
|        |             | ELIGIBILITY UNDER 1931 OF THE ACT |

SSI Income: SSI income received by a family member is excluded in determining eligibility. The needs and other countable income of the SSI recipient will be included in determining eligibility.

## Resource Methodologies

Bonds: Bonds which have an individual or combined face value of not more than \$1,000 are not be considered an asset. When bonds are redeemed, the redemption value are counted as an asset.

Interest: Interest earned on assets are considered as an asset, not income.

Life insurance: Life insurance is not considered an asset.

Lump Sums: Nonrecurring earned or unearned lump sum income is considered as an asset subject to the \$3,000 limit.

Money Set Aside for Future Post-secondary Education: Money set aside for the future post-secondary education of a dependent child is excluded as a resource in determining eligibility.

Motor Vehicle Exclusions: One motor vehicle with an equity value of \$9,500 or less or a motor vehicle used to transport a handicapped person is excluded. If the family has both types of vehicles, they may choose which one to exclude.

Pensions, etc.: IRAs, Keoghs, 401Ks, pensions and annuities are excluded as assets. If IRAs, Keoghs, 401Ks, pensions or annuities are redeemed, the redemption value is counted as an asset. Income produced and paid to the recipient by such sources is considered countable income.

| ГN No.: <u>99-005</u> | Approval Date 10/19/200. | Effective Date: <u>04-01-99</u> |
|-----------------------|--------------------------|---------------------------------|
| Supercedes TN No.: '  |                          |                                 |

| State: | Connecticut |                                   |
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|        |             |                                   |
|        |             | ELIGIBILITY UNDER 1931 OF THE ACT |

The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

## **Income Methodologies**

Child Support: For AFDC, the first \$50 per month of current child support income received by the family is disregarded whether paid directly to the family or through the department. All other current child support income is counted in determining eligibility.

Dependent Child Earnings: For AFDC, earned income of a dependent child who is a full-time student is disregarded for six months in determining eligibility.

Disregard of Awards: For AFDC, financial awards received by a recipient for educational attendance, attaining certain grade levels, or attainment levels (e.g., increased reading level) are counted income in determining eligibility.

Earned Income Disregard: For AFDC, \$90 is deducted from the gross earnings and a disregard of \$30 plus 1/3 of the remainder is given for the first four months of employment. Then, \$90 plus \$30 is disregarded for the next eight months. After that only \$90 is disregarded from earned income. The remainder is counted in determining eligibility.

Gross Income Test: For AFDC, if gross income exceeds to 185% of the Standard of Need, the family is ineligible.

Income Disregard: For AFDC, there is no disregard of countable income.

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| TN No.: <u>99-005</u> | Approval Date | 14/1/2000 | Effective Date: <u>04-01-99</u> |
| Supercedes TN No.:    |               | 1         |                                 |

| State: Connecticut   |       |
|--|-------|
| ELIGIBILITY UNDER 1931 OF THE ACT  |       |
| SSI Income: SSI recipients are not eligible for AFDC.  |       |
| Resource Methodologies   |       |
| Bonds: For AFDC, the cash value of bonds is counted as an asset.   |       |
| Interest: For AFDC, interest earned on assets is counted as income.  |       |
| Life insurance: For AFDC, the cash surrender value of life insurance policies is counted as an asset.  |       |
| Lump Sums: For AFDC, lump sum income is divided by the Standard Need to determine the number of months to count a prorated portion a income.   |       |
| Money Set Aside for Future Post-secondary Education: For AFDC, money set aside for the future post-secondary education of a dependent child is counted as an asset.  | t     |
| Motor Vehicle Exclusions: For AFDC, up to \$1,500 of equity of one movehicle is excluded.  | otor  |
| Pensions, etc.: For AFDC, IRAs, Keoghs, 401Ks, pensions and annuitie counted as assets.  | s are |
| The agency terminates medical assistance (except for certain pregnant women and children) for individuals who fail to meet TANF work requireme   | nts.  |
| X The agency continues to apply the following waivers of provisions of I A of title IV in effect as of July 16, 1996 or submitted prior to August 22 1996 and approved by the Secretary on or before July 1, 1997. |       |
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| TN No.: 99-005 Approval Date 1/2/1/2000 Effective Date: 04-0 Supercedes TN No.:  | 1-99  |

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### STATE PLAN UNDER TITLE XIX IF THE SOCIAL SECURITY ACT

| State: Connecticut |                                   |
|--------------------|-----------------------------------|
|                    | ELIGIBILITY UNDER 1931 OF THE ACT |

<u>Deprivation</u>: Deprivation in a two-parent household regardless of how many hours the principal wage earner is employed. The 100 hour rule has been eliminated.

Resource Limit: The resource limit is \$3,000.

<u>Deemed Income</u>: The amount of income from stepparents, ineligible parents and spouses, and parents of pregnant minors and minor parents counted as income to the applicant/recipient family is determined as follows. One hundred percent of the Federal Poverty Guidelines is subtracted from the person's income. The remainder is deemed available to the applicant/recipient family. If deeming beyond parent-to-child or spouse-to-spouse causes ineligibility of the entire family, the family is divided into sub-units and income is not deemed to anyone who is not a child or spouse of the deemor.

<u>Earnings disregards</u>: For families who did not receive Medicaid in one of the four preceding months, \$90 is deducted from the gross earnings and the remainder is counted in determining eligibility.

| TN No.: <u>99-005</u> | Approval Date 10/19/2000 | _Effective Date: <u>04-01-99</u> |
|-----------------------|--------------------------|----------------------------------|
| Supercedes TN No.:    |                          |                                  |